

December 2008

TO: Tschudy Family Scholarship Recipients

FROM: Dana Kelly Manager, Student Affairs Programs

SUBJECT: Enrollment – School Year 2009-10

The Tschudy Family Scholarship Program rules require recipients to annually file a statement of intent to continue as a full-time undergraduate student. Please complete this questionnaire and return it to me between **January 1, 2009 and February 1, 2010.**

Dana Kelly, Student Affairs Program Manager
P.O. Box 83720
Boise, ID 83720-0037
Fax: (208) 334-2632

☐ I intend to enroll in Fall, 2009.

Year in School _____ Anticipated graduation date _____

☐ I do not intend to enroll in 2009-10. (Please state reason) _____

If you have already graduated, CONGRATULATIONS! Please complete and return the form.

(Please Type or print legibly)

Name _____

Address: _____ **Phone** _____

_____ **E-mail** _____

_____ **SSN** _____

Recipient's Signature _____ **Date** _____

Recipient is responsible for acquiring the following verification and signature

To Be Completed by College/University Official:

Number of Credits Currently Enrolled _____

Current Cumulative Grade Point Average _____

Official's Signature _____